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FACSIMILE TRANSMISSION COVER SHEET

Date: August 19, 2005

To: United States Patent and Trademark Office
Examiner: Mills, Donald; Art Unit: 2662

Fax: (571) 273-8300

Re: **Application Serial No.: 09/418,397**
Filing Date: 10/14/1999; First-Named Inventor: Whitfield
Attorney Docket No.: 01CON251P

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 29

Message:

Enclosed please find the Response to Non-Final Office Action dated June 29, 2005.

Thank you.

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Attorney Docket No.: 01CON251P

AMENDMENT COVER SHEETIN RE APPLICATION OF: Whitfield, et al.SERIAL NO.: 09/418,397 FILED: 10/14/1999FOR: Method and Apparatus for Early Detection of DTMF Signals in Voice Transmissions Over an IP NetworkHONORABLE COMMISSIONER FOR PATENTS
P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

☒ No additional fee is required.☐ The fee has been calculated as shown below:☐ EXTENSION FEE

	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$
SECOND MONTH AFTER TIME PERIOD SET	450.00	225.00	\$
THIRD MONTH AFTER TIME PERIOD SET	1,020.00	510.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,590.00	795.00	\$

☐ TOTAL EXTENSION FEE \$ 0.00☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1 Number of Claims after Amendment	Column 2 Number Previously Paid for	Column 3 Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	81	MINUS **81	* = 0	x 50	x 25	\$
INDEPENDENT	11	MINUS ***11	* = 0	x 200	x 100	\$
First presentation of multiple dependent claim				+ 360	+ 180	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

- * If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.
 ** If the number of Total Claims previously paid for is less than 20, write "20" in this space.
 *** If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

99RSS023

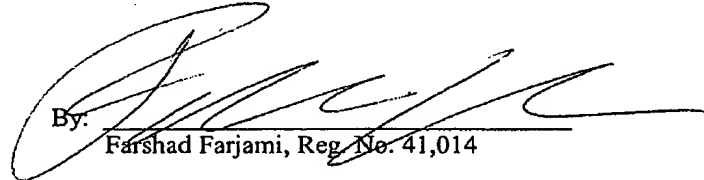
Attorney Docket No.: 01CON251P

- ☐ Enclosed is the total fee of \$ _____ (Payment by Credit Card, Form PTO-2038 Enclosed).
- ☐ Please charge Deposit Account No. 50-1867 in the amount of \$ _____
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-1867. A duplicate copy of this sheet is enclosed.

Date:

8/19/05

By:


Farshad Farjami, Reg. No. 41,014CERTIFICATE OF FACSIMILE TRANSMISSION

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Date

Signature

Christina CarterChristina Carter

Name of Person Performing Facsimile Transmission

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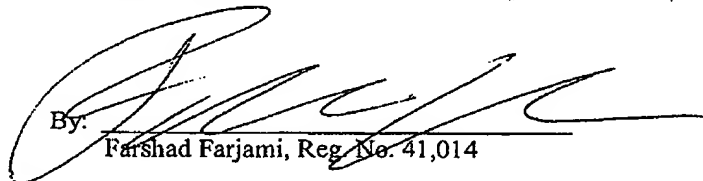
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Applicant(s): Whitfield et al. Application Serial No.: 09/418,397 Filed: October 14, 1999 Title: Method and Apparatus for Early Detection of DTMF Signals in Voice Transmissions Over an IP Network	Group Art Unit: 2662 Examiner: Mills, Donald L.
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RESPONSE TO NON-FINAL OFFICE ACTIONCommissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

This is in response to the *non-final* Office Action, dated June 29, 2005, in the above-referenced patent application. Please enter and consider the following remarks.